

As the below named inventor(s), I/we declare that:

COPY OF PAPERS ORIGINALLY FILED



PTO/SB/01A (10-00)
Approved for use through 10/31/2002. OMB 0651-0032
U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE
Under the Paper lock Reduction Act of 1995, no persons are required to respond to collection of information unless it displays a valid OMB control number

DECLARATION (37 CFR 1.63) FOR UTILITY OR DESIGN APPLICATION USING AN APPLICATION DATA SHEET (37 CFR 1.76)

This declaration is directed to:									
	The attached application, or								
⊠	Application No. 09/942,405, filed on AUGUST 30, 2001,								
	as amended on (if applicable);								
I/we believe that I/we am/are the original and first inventor(s) of the subject matter which is claimed and for which a patent is sought;									
I/ we have reviewed and understand the contents of the above-identified application, including the claims, as amended by any amendment specifically referred to above;									
I/we acknowledge the duty to disclose to the United States Patent and Trademark Office all information known to me/us to be material to patentability as defined in 37 CFR 1.56, including material information which became available between the filing date of the prior application and the National or PCT International filing date of the continuation-in-part application, if applicable; and									
All statements made herein of my/own knowledge are true, all statements made herein on information and belief are believed to be true, and further that these statements were made with the knowledge that willful false statements and the like are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001, and may jeopardize the validity of the application or any patent issuing thereon.									
FULL NAME OF INVENTOR(S)									
Inventor one: PRENTICE LEE HUFFINES									
Signature: Lunt	cie Le Haff Citizen of: UNITED STATES								
Inventor two: HYUN	SUNG LIM								
Signature:	Citizen of: UNITED STATES								
Inventor three: OSCA	R.L. MARTIN JR.								
Signature:	Citizen of: UNITED STATES								
Inventor four: HAGE	UN SUH								
Signature: Has	Citizen of: REPUBLIC OF KOREA								
Additional inventors are being named on additional form(s) attached hereto.									
jurden Hour Statement: This collection of information is required by 35 U.S.C. 115 and 37 CFR 1.63. The information is used by the public to file (and the									

PTO to process) an application. Confidentially is governed by 35 U.S.C. 115 and 37 CFR 1.63. The information is used by the public to file (and the PTO to process) an application. Confidentially is governed by 35 U.S.C. 122 and 37 CFR 1.14. This form is estimated to take 1 minute to complete. This time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Washington, DC 20231.

COPY OF PAPERS ORIGINALLY FILED

ease type a plus sign (+) inside this box JAN 1 5 2002 PTO/SB/81 (02-01) Approved for use through 10/31/2002. OMB 0651-0035 U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it contains a valid OMB control number. 09/942,405 **Application Number** ،۱۹۰۱ در AUGUST 30, 2001 Filing Date POWER OF ATTORNEY OR PRENTICE LEE HUFFINES ET AL. **First Named Inventor** COMPOSITE SHEET MATERIAL Title **AUTHORIZATION OF AGENT** 1771 **Group Art Unit** UNKNOWN **Examiner Name** TK3615USNA Attorney Docket Number I hereby appoint: ☑ Practitioners at Customer Number 23906 Practitioner(s) named below: Name Registration Number as my/our attorney(s) or agent(s) to prosecute the application identified above, and to transact all business in the United States Patent and Trademark Office connected therewith. Please change the correspondence address for the above-identified application to: OR Place Bar Code Label Here ☐ Practioners at Customer Number OR Firm or Individual Name Address Address City State ZIP Country Telephone Fax I am the: Applicant/Inventor. Assignee of record of the entire interest. See 37 CFR 3.71. Certificate under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96). SIGNATURE of Applicant or Assignee of Record Name PRENTICE LEE HUFFINES Signature Date NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below*.

Burden Hour Statement: This form is estimated to take 3 minutes to complete. Time will vary depending upon the needs of the individual case. Any Comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Washington, DC 20231.

*Total of 4 forms are submitted.

COPY OF PAPERS

ORIGINALLY FILED Please type a plus sign (+) inside this box PTO/SB/81 (02-01) Approved for use through 10/31/2002. OMB 0551-0035 U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE Inder the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it contains a valid OMB control number. 09/942,405 **Application Number** AUGUST 30, 2001 Filing Date POWER OF ATTORNEY OR PRENTICE LEE HUFFINES ET AL. **First Named Inventor** COMPOSITE SHEET MATERIAL Title **AUTHORIZATION OF AGENT Group Art Unit** 1771 UNKNOWN **Examiner Name** TK3615USNA Attorney Docket Number I hereby appoint: Practitioners at Customer Number 23906 ☐ Practitioner(s) named below: Name Registration Number as my/our attorney(s) or agent(s) to prosecute the application identified above, and to transact all business in the United States Patent and Trademark Office connected therewith. Please change the correspondence address for the above-identified application to: The above-mentioned Customer Number OR Place Bar Code Label Here ☐ Practioners at Customer Number Firm or Individual Name Address Address State ZIP City Country Telephone Fax I am the: Applicant/Inventor. Assignee of record of the entire interest. See 37 CFR 3.71. Certificate under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96). SIGNATURE of Applicant or Assignee of Record Name HYUN SUNG LIM Signature

Burden Hour Statement: This form is estimated to take 3 minutes to complete. Time will vary depending upon the needs of the individual case. Any Comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Washington, DC 20231.

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required.

200

Submit multiple forms if more than one signature is required, see below*.

Date

*Total of 4 forms are submitted.

COPY OF PAPERS ORIGINALLY FILED

ORIGINALLY FILED Please type a plus sign (+) inside this box PTO/SB/81 (02-01) Approved for use through 10/31/2002. OMB 0651-0035
U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it contains a valid OMB control number. A MAULI 09/942,405 **Application Number AUGUST 30, 2001** Filing Date POWER OF ATTORNEY OR PRENTICE LEE HUFFINES ET AL. **First Named Inventor** COMPOSITE SHEET MATERIAL Title **AUTHORIZATION OF AGENT Group Art Unit** UNKNOWN **Examiner Name** TK3615USNA **Attorney Docket Number** I hereby appoint: Practitioners at Customer Number 23906 ☐ Practitioner(s) named below: Name Registration Number as my/our attorney(s) or agent(s) to prosecute the application identified above, and to transact all business in the United States Patent and Trademark Office connected therewith. Please change the correspondence address for the above-identified application to: The above-mentioned Customer Number Place Bar Code Label Here ☐ Practioners at Customer Number OR Firm or Individual Name Address Address City State ZIP Country Telephone Fax I am the: Applicant/Inventor. Assignee of record of the entire interest. See 37 CFR 3.71. Certificate under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96). SIGNATURE of Applicant or Assignee of Record Name OSÇAR L. MARTINUR Signature

Burden Hour Statement: This form is estimated to take 3 minutes to complete. Time will vary depending upon the needs of the individual case. Any Comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Washington, DC 20231.

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required.

Submit multiple forms if more than one signature is required, see below*.

Date

*Total of 4 forms are submitted.

COPY OF PAPERS ORIGINALLY FILED

OIPE	_										
, •	Please type	a plus sign ((+) in ide this box	-	+						
JAN 1 5 2000		work Reducti	ion Act of 1995, no persons	are re	equired to respond	U.S. Patent a to a collection (and Trademark (Office; U.	.S. DEPARTM	PTO/SB/81 2002. OMB 065 ENT OF COMI OMB control r	51-0035 MERCE
<u> </u>	-				Application I		09/942,40				
WWEN.	1			ļ	Filing Date	TMITTE .	AUGUST		1		
!	POWE	R OF A	ATTORNEY OR	ļ	First Named	Inventor			UFFINES ET	Γ AL.	.
ļ							COMPOSI	ITE SHE	EET MATERI	AL	
	AUITO	AUTHORIZATION OF AGENT			Group Art Ur	nit	1771		•		
	1	<i>V</i> .				Examiner Name					
,	<u></u>				Attorney Doc	r TK3615US	TK3615USNA				
-	I hereby appo ☑ Practitions OR ☐ Practitions	ers at Cust	tomer Number		23906			PAT	TENT TRADEMA	RK OFFICE	i
		31(3) 116					Pagistration N	on Number			
	ı -		Name				Registration N		r 	ļ	
											
	ı L										
	1] .	
										İ	
	as my/our attorney(s) or agent(s) to prosecute the application identified above, and to transact all business in the United States Patent and Trademark Office connected therewith.										
	Please change the correspondence address for the above-identified application to: ☑ The above-mentioned Customer Number OR ☐ Practioners at Customer Number OR										
	Firm <i>or</i> Individua	al Name									
1	Address										
	Address										
	City				St	ate	-	ZIP			
	Country	- 1	·			•					
	Telephone				F	ax					
	I am the:	<u>-</u>	·		<u> </u>				, . <u></u>		
	Applicant/Inventor.										
	Assignee of record of the entire interest. See 37 CFR 3.71. Certificate under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96).										
1	SIGNATURE of Applicant or Assignee of Record										
	Name HAGEUN SUH										
	Signature		yeu Sah	-							
	Date		123/01								
1	NOTE: Signa			signe	ees of record c	of the entire	interest or th	heir rer	oresentativ	e(s) are req	uired.
!	NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below*.										

Burden Hour Statement: This form is estimated to take 3 minutes to complete. Time will vary depending upon the needs of the individual case. Any Comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Washington, DC 20231.

★Total of 4 forms are submitted.